

PART B - FEE(S) TRANSMITTAL

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7590

11/10/2008

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/510.519

10/06/2004

Christophe Girold

434299-605

8870

TITLE OF INVENTION: VITRIFICATION FURNACE AND METHOD WITH DUAL HEATING MEANS

434299-605

VITRIFICATION FURNACE WITH DUAL HEATING MEANS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEES DUE	DATE DUE
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nonprovisional

NO

\$1510

\$300

08/06/2009 INTEFSW \$ 00004684 10510537/10/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
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HALPERN, MARK

1791

065-135600

01 FC:1501

1510.00 DA

02 FC:1504

300.00 DA

03 FC:8001

3.00 DA

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

NIXON PEABODY LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

COMMISSARIAT A L'ENERGIE ATOMIQUE - PARIS, FRANCE

COMPAGNIE GENERALE DES MATIERES NUCLEAIRES, VELIZY VILLACOUBLAY, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 1

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☐ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3557 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

February 5, 2009

Typed or printed name

Robert E. Krebs

Registration No.

25,885

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